## RECORD OF RESPONSES TO CHARACTER COMMITTEE INQUIRIES

Instructions to Applicant: This form will be used by the Board to record the receipt of responses from each reference for whom you have mailed a verification form to. You should type your name in the space indicated and type, in the applicable space below, the full name for each employer, professional reference, and personal reference you listed in items #12, 29, and 30 of the character questionnaire.

Applicant:	Date of Intervi	ew with Character	Committee	
(Full name of applicant)				(Date)
Applicant to list employers per Question 12 EMPLOYERS: (names of employers only)	DATE OF 1ST REQUEST	DATE OF 2ND REQUEST	DATE OF 3RD REQUEST	DATE RESPONSE RECEIVED
Applicant to list names per Question 29 PROFESSIONAL REFERENCES: (names only)	DATE OF 1ST REQUEST	DATE OF 2ND REQUEST	DATE OF 3RD REQUEST	DATE RESPONSE RECEIVED
	DAME OF 10T	DATE OF AND	DATE OF ARR	DATE DEGRONGE
Applicant to list names per Question 30 PERSONAL REFERENCES: (names only)	DATE OF 1ST REQUEST	DATE OF 2ND REQUEST	DATE OF 3RD REQUEST	DATE RESPONSE RECEIVED

Make additional copies if necessary